

December 1, 2014

TO:

All Employees

FROM:

County Commissioners

SUBJECT:

Wellness Program (Signature Required)

Teton County has adopted a wellness program in order to help minimize future insurance premium increases by discovering health problems in their early stages. The 2015 wellness program consists of basic blood testing and a wellness visit with your health care provider. This will enable you to know the status of your overall health and whether any intervention is needed. The blood testing and follow-up visit must be completed by March 1. We appreciate your support and hope you find the testing to be helpful.

Premiums for employees choosing not to participate in the wellness program will increase by 20% effective March 1, 2015. The County will not cost-share this premium increase. Spouses who are covered under an employee's plan must also participate in wellness testing in order to avoid a 20% premium increase.

In order to obtain your blood test and wellness visit you should: (1) Call your health care provider and schedule an appointment; (2) Tell your provider where you would like your blood test done & ask him/her to issue an order for the specific tests listed below, plus any others you might need (knowing they may not be covered by the Regence wellness plan); (3) Obtain your blood test - your results will be sent to your provider; (4) Attend your wellness appointment; (5) Have your provider complete and sign the form on the bottom of this page; (6) Return the form to the payroll department no later than March 1, 2015.

All expenses related to this wellness program will be covered 100% by Regence insurance if you: (1) use an In-Network physician and facility, (2) obtain only the tests listed below, and (3) tell your health care provider that the blood test and visit is part of a wellness program so that the bill is coded properly.

The following blood tests are required. (NOTE: Additional blood tests may not be covered by Regence.)

Men's Wellness

Basic Lipid Panel
PSA
Hemoglobin A1c
Complete Blood Count (CBC)
Comprehensive Metabolic Panel (CMP)
Blood Pressure

Women's Wellness

Basic Lipid Panel Hemoglobin A1c Complete Blood Count (CBC) Comprehensive Metabolic Panel (CMP) Blood Pressure

*** Please return this signed form to the Teton County Payroll Department immediately after your visit!***

(Printed Name of Health Care Provider)	hereby acknowledge that I have reviewed, met with, and
discussed the results of my patient's _	wellness blood test, and (Printed Name of Patient)
he/she is aware of what steps need to be taken to improve his/her health.	
(Signature of Health Care Prov	vider) (Date)